THE

BOSTON MEDICAL AND SURGICAL JOURNAL.

VOL. XVIII.] WEDNESDAY, JULY 11, 1838. [NO. 23.

LECTURE ON ULCERS.

DELIVERED AT THE PHILADELPHIA MEDICAL INSTITUTE, BY THOMAS HARRIS, M.D. SURGEON TO THE PENNSYLVANIA HOSPITAL.

In common language an ulcer and sore are used as synonymous. The term ulcer is derived from a Greek word, signifying to draw, because it was thought that peccant and unhealthy humors of the body were eliminated through it. Hence the old practice of dressing sores with such stimulating salves as promote purulent discharges. This doctrine is now happily repudiated. I have already told you that suppuration is a destructive process, depending on derangement in the action of the capillaries, which secrete, in a healthy state, both the solids and interstitial fluids of the body. Ulceration is a mere compound action, consisting of the formation of little organic or fleshy eminences, called granulations, connected with the secretion of pus. The class of capillaries that secrete the solids of the body are now engaged in building granulations, while those capillaries, which, in their natural state, secrete the interstitial fluids, during the process of ulceration secrete pus. Burns and other surgical pathologists are of opinion, that when there are no granulations, perfect or imperfect, healthy or the contrary, there can be no ulceration. Ulceration is a restorative process, in which healthy flesh, or granulations, are secreted. Where there are no granulations, it is a "mere suppurating surface." Although I concur in opinion with these gentlemen, still I will, for the sake of custom and convenience, continue the old nomenclature.

Ulcers are divided into healthy or simple, indolent, irritable, and phagedenic. The simple healthy ulcer is commonly the result of an abscess, and is met with in a sound constitution. Its characters are florid and pointed granulations, having an even surface, but slightly elevated above the surrounding skin, and covered by a matter of the color and consistence of cream. By granulations, I mean those little eminences springing from the cellular tissue, by which the surface of an ulcer is covered. They present a reticulated structure when examined through a microscope. Their bases are broad, and they contract, as they approach the surface, to about one third of their original diameter. When the constitution is sound, and the body in a healthy condition, they spring up very rapidly. They evince a great disposition to unite one with another, and from this natural process we derive useful hints in their treatment.

When the solution of continuity is entirely filled up by red and even granulations, secreting a yellowish pus, the process of cicatrization commences. A white, shining, transparent film covers the surface of the sore. The cutis vera is first formed, the cuticle next, and the rete mucosum last of all. Thus we can account for the difference of color in a cicatrix which often exists so long. This is peculiarly the case with the negro. Sometimes, indeed, the rete mucosum is never regenerated.

Of all the remedies which have been proposed to cure ulcers, not one deserves the name. Ulceration is a natural, restorative process, instituted to repair some injury. All that the surgeon can do is to assist the healthy action which is going on. A poultice at first will be found a very soothing and comfortable application. When the granulations have risen near the surface, the poultice should be removed; it relaxes and weakens the parts, and now does harm. Simple cerate, adhesive plaster, or dry lint, may be substituted. An oval piece of dry lint may be applied to the centre of the sore. Sometimes the granulations become too luxuriant, and are said to be *fungous*, or are termed, in common language, *proud-flesh*. In such cases they may be compressed by the means just mentioned. When languid we must apply some stimulating application. Numerous ointments have been proposed to effect this. These greasy substances are very apt to irritate the sore, on account of their becoming rancid from the heat of the parts. I, therefore, commonly prefer using the same articles in the form of washes. These may be applied on a piece of lint to the surface of the ulcer, and the whole covered by oiled silk to prevent evaporation. The black and yellow washes, solutions of the nitrate of silver, and sulphate of copper, may be used for this purpose. Attention must be paid to the diet of the patient, as well as to his general health, and all stimulating drink and food must be forbidden. The part must also be kept at rest. I may mention that within a few years, in the London Hospitals, cold water has been found a very pleasant and excellent application to ulcers.

Sometimes, from bad treatment, or from impaired constitutional powers, the ulcer assumes an indolent character, evincing an indisposition to heal. There are no granulations; the surface is flat and shining, glassy, and semi-transparent. The edges are smooth, rounded, elevated and protuberant, making the chasm in the flesh appear much deeper than in reality it is; for it, in fact, is but little below the level of the skin. Indolent ulcers occur generally in parts remote from the centre of the circulation, as the leg; and are most frequently met with in intemperate habits. Local means will effect but little, unless the constitution is attended to. You must first regulate this. A good pill to improve the secretions, and conduce towards this end, is the following:— R. Extract colocynth. comp. gr. xxiv.; pil. hydrarg., pulv. rhei, āā gr. xij. Ft. mass. et div. in pil. no. xii. Sig. Two or three at night.

Where gastric derangement exists, as we often find in persons of luxurious habits of life, I have found no mixture so excellent as the following. Indeed, in several forms of dyspepsia, especially in those connected with irritation of that viscus, I look upon it as invaluable. R. Extract. taraxici, ʒj.; potassæ tart. ʒvj.; sodæ bi-carb. ʒj.; tinct.

rhei, ʒ 3 vi.; aq. bullient. Oj. M. ft. infus. Sig. A half a wine-glass full three times a day.

Place your patient in bed, elevate his limb, and apply a poultice. You must then employ stimulating applications. Of these there are a great number, and you will find it advantageous to be acquainted with, and employ, perhaps, all. It is very necessary to change frequently your applications in the treatment of all kinds of ulcers. An ulcer will do very well for some days under one application, which will then lose its effects, and you must resort to another and another, until you succeed in accomplishing a cure. The fermenting poultice, made by mixing Indian meal and porter, and putting them before the fire to ferment; poultices containing the chloride of lime or soda; the black and yellow wash, and the solutions of the sulphate of copper or zinc, with a host of others, may be mentioned. A solution of nitric acid—fifty drops to the pint of water—is highly recommended by Sir Astley Cooper, in this form of ulcer. An excellent application to an indolent ulcer, and one which I frequently employ, consists of equal parts of bees-wax and Venice turpentine, melted together, and poured, when cooling, into the ulcer, and confined there by strips of adhesive plaster. So long, however, as the edges remain in the callous and undermined condition before mentioned, it is impossible to cure the ulcer. They must be removed by the knife or caustic. The method usually employed is to apply over the ulcer a piece of adhesive plaster, cut to fit the sore, and then to burn off the edges with the caustic potash. A plan of treatment for indolent ulcers was proposed, some years ago, by Baynton. It consisted of the application of adhesive straps, encircling three fourths of the leg, with holes cut in them to permit the passage of the matter. This plan sometimes succeeds very well, but I have seen it prove very injurious. Baynton says, that by adopting this method the necessity of confinement to bed is obviated, he allowing the patient to walk about. I never yet saw a case of ulcer where motion did not do harm. One variety of the indolent ulcer, and a very common form of the disease, is connected with an enlarged or varicose condition of the veins. This is the result of phlebitis, or inflammation of the veins, for in every case we find them preternaturally thickened; they are four times as thick, and often twice as long, as natural. The veins are very tortuous, and return on themselves. The valves do not act, and the column of blood has nothing to sustain it. Ambrose Paré, and the old surgeons, were in the habit of removing the enlarged venous cluster by the actual cautery. This was, of course, a very cruel and unnecessary procedure. Another practice is to cut down and apply a ligature to the vessel. This is a very dangerous operation, fatal phlebitis often following it. Sir Astley states, that he would, in his own case, rather have a ligature applied to his femoral artery, than have his saphena vein tied. Sir Benjamin Brodie proposes to divide the vein; for this purpose he introduces a narrow, slightly curved bladed bistoury, with its cutting edge on the convex side, between the integument and vein, and turning the back to the former, cuts through the vessel. Reunion, however, is found to follow this operation, and the varicose condition to return. In the early stage, leeching along

the course of the vein, aided by compression, is often sufficient to effect a cure. If the disease has existed for any time, an operation becomes necessary. The one I have been in the habit of performing, is that proposed originally by Dr. Hartshorn, of this city. You cut down upon the vein, dissect out about two inches, and remove it; you then apply a compress above and below the wound, and confine the whole limb by a bandage. The first dressings are to be suffered to remain four or five days. I have now performed this operation fifteen times, and in but one instance did any bad effects follow. That patient had an attack of phlebitis, from which he recovered. The French surgeons have lately proposed a new operation for this affection; it consists in passing a needle through the vein and confining it there for several days by means of a ligature. I have tried it lately in a case of varicocele, and with success. On the same principle, Fricke, of Hamburg, passes a ligature through the vein, and permits it to remain in a sufficient length of time to excite the requisite inflammation for the obliteration of the vessel. Liston, and other English surgeons, apply caustic to that portion of the vein which is healthy, until inflammation occurs and its cavity is destroyed.

The next description of ulcers to which I shall direct your attention is the irritable ulcer. This may be recognised by the great pain it occasions, the jagged, irregular edges; the florid, unequal granulations, and the bloody, fœtid, and ichorous discharge. The constitutional symptoms, too, are often very severe and distressing. Pressure on the part occasions intense suffering; the weight even of a poultice will sometimes produce a great deal of pain. Various local applications have been recommended; among these, fomentations with poppy heads will be found very soothing and serviceable. The mucilages of flax seed, slippery elm, and sassafras, you will also find very advantageous when inflammation exists; indeed, when this occurs to any extent, you must resort to leeching; your leeches must be applied around the ulcer, to the sound, uninflamed skin. Sir Astley Cooper's anodyne lotion you will find, at times, a valuable application. We use it in the Pennsylvania Hospital with a great deal of success. It is composed of—R. Extract. opii, ʒss.; pulv. acac. ʒiss.; aq. calcis. ʒivss. M. ft. sol.

But the great secret in the treatment of every description of ulcer, as I have before told you, is to change constantly your applications; when you find one losing its effects, try another, and so on. In the treatment of indolent ulcers the greatest benefit is derived from the internal use of opium and calomel. Some surgeons are of opinion that the anodyne alone will answer, but my experience is in favor of the addition of the mercurial. I give one grain of opium and two of calomel twice or thrice a day. From the employment of this remedy I have derived the greatest benefit. When the character of the ulcer is changed, and the granulations begin to spring up, the local application of opium must be stopped, as it tends to deaden the parts, and prevent the healing process.

The last variety of ulcers of which I shall speak to-day, is the sloughing or phagedenic ulcer. The phagedenic ulcer prevails often to a great extent in hospitals. In the Pennsylvania Hospital, last winter, there

must have been at least twenty cases. It often proves very fatal, attacking patients of all descriptions, causing a fatal termination to the slightest wound. When it attacks a part, the granulations lose their florid hue and become flabby; the parts swell, and an ichorous discharge is poured out. It is commonly connected with erysipelas. Some surgeons consider it as contagious. The constitution is severely implicated; the pulse can scarcely be felt; the countenance becomes sunken; the eyes are glassy; a cold sweat covers the whole body, and the patient rapidly sinks. Various means have been proposed to arrest this formidable malady. In the Pennsylvania Hospital the purgative plan has been found the most effectual, combined with the usual local means for the arrest of gangrene. Blisters have been highly lauded as a means of arresting hospital gangrene, but I have known repeatedly the parts on which the blister has been applied to slough, and thus aggravate the patient's condition. Removal to another ward will very often speedily put a stop to this affection.—*Medical Examiner.*

MERCURY.

FROM SIGMOND'S LECTURES ON THE MATERIA MEDICA.

[Continued from page 187.]

One of the ill effects of mercury is the production of salivation, or, as it has likewise been termed, ptyalism. This is one of the proofs of the action of the metal upon the system, and has been produced by very small quantities, very rapidly. Various are the theories which have been brought forward to account for this determination to the salivary glands; but it would be useless for me to attempt any explanation, for none of those that have been advanced are perfectly satisfactory. There seems, in some constitutions, a peculiar idiosyncrasy, which is exhibited by the incapability of taking a very minute quantity of this mineral without this effect being very rapidly produced. Five grains of blue pill, taken for three successive nights, have been known to produce salivation; and Dr. Ramsbotham, in the "Medical Gazette," states, that death occurred after such a small quantity. I think that in many instances, where such results have arisen, the blue pill must have been adulterated, or that the confection of roses must have contained a larger quantity of acid, and that the resulting decomposition must have caused the formation of a destructive salt.

Dr. Crampton has, in the "Transactions of the Royal College of Physicians," narrated a case in which calomel in so small a quanity as two grains, excited salivation. This was followed by extensive ulceration of the throat, exfoliation of the lower jaw, and death.

There are numerous substances, both in the vegetable and mineral kingdom, which will produce very considerable salivation, though of a different character from that which is attendant upon the use of this metal. Amongst the minerals the salts of gold, of antimony, and of copper, are the most remarkable. Croton oil, digitalis, amongst the vegetables; the imagination, too, has great influence. In the "Medi-

co-Chirurgical Review," we are told that a very salutary salivation has been produced by bread-pills in a very hypochondriac patient, who fancied that he had syphilis, and that he ought to be put under the influence of mercury, and particular injunctions were given him to leave them off as soon as the mouth became affected. Sauvages speaks of twenty species of salivation, enumerating that which attends upon smallpox, occasionally upon gout, upon pregnancy, and even upon syphilis, where no mercury has been administered. Cases of salivation in all these states are to be found in our periodicals. In the twenty-sixth volume of the "Medical and Surgical Journal," will be read an instance of a lady who, for a fortnight, daily excreted two or three pints of viscid fluid. Two physicians were called in, during different periods of the affection; they were equally unsuccessful in putting a stop to the salivation. Great care was taken to ascertain if any empirical remedy had been used, but there was not any ground to believe that mercury had, in any shape, been taken. The diseased state yielded spontaneously after all remedies had been given up. It has accompanied cynanche, paralysis, fever, bronchitis; but there is a very striking difference in the symptoms that appear at the same time. There is no fœtor of the breath, no brassy taste, no sponginess of the gums.

Dr. Bostock has, in the "Medico-Chirurgical Transactions," stated some experiments that he made upon the saliva during mercurialization. He had some years before analyzed the fluid in its ordinary state. The deductions to be drawn from his labors are, that the chemical constitution of the mercurial is, in many points, different from the common saliva, and this consists in the presence of a quantity of animal matter, possessing properties which resemble those of albumen in its uncoagulated state, or as it is found in the serum of the blood. The change would appear, he says, to consist essentially in the conversion of the animal matter from the state of a mucous to that of a serous, or, rather, an albuminous fluid. Dr. Bostock made his examination of the saliva when the system was fully under the influence of the mercury, when about two quarts a day were excreted, but there was no appreciable trace of mercury in the fluid: the analysis leads him to a physiological inquiry into the action of this remedy, for which I must refer you to the paper in question. When the system begins to evince that it is under the control of the medicine, various symptoms are exhibited; sometimes they are of a mild nature, at others they are very violent; the mouth sometimes first displays the constitutional affection, but it is most generally preceded by some degree of acceleration of the pulse, a degree of feverish excitement, and various nervous affections. If the ptyalism be suddenly established without much previous admonition, the excitability of the system is very commonly much greater, and general constitutional disorder is evinced, and the soreness of the mouth causes an irritability of the whole frame; considerable absorption of the fatty matter, attended by a great extenuation of the body, is quickly visible, and the stoutest person generally becomes thin and emaciated; the excretions from the various organs are altered in appearance, and, oftentimes, in odor; the salvine evacuations become of a brighter yellow, the urine is

higher colored; a peculiar state of skin, evinced by a very singular fœtor, which is quite diagnostic of the mercurialization, and of which it is impossible to convey any impression by language. It materially differs from the smell that issues from the body after sweating has been produced by Dover's powder, or that which occurs during some eruptive fevers, or upon mental derangement; it is a peculiar characteristic which occasionally lasts after ptyalism ceases. When the action is very severe upon the mouth, the misery which taking any food produces is enough to prevent the indulgence of the appetite, which is sometimes not at all diminished; but when the ptyalism has completely ceased, the appetite is of the most ravenous character, which nothing appears to satisfy; then nutrition recommences, the deposition of the well-digested secretions in the various parts of the body, which have lately lost their usual quantity of fatty matter, is very rapid, and the frame speedily acquires even a greater bulk than it previously had, and oftentimes the standard of health is more firmly fixed than it was before; but this is not always the case; some individuals are left in a state of great feebleness, and liable to every shock that would, under ordinary circumstances, be light. Sometimes local disease has lasted for some time, and even run to a very outrageous extent; ulcerations of the tongue, exfoliations of the alveolar process. Various are the means by which the ill effects of the metal have been attempted to be counteracted. Sulphur has acquired considerable celebrity, and has been said to diminish its action. Dr. Lettsom says, he generally found it sufficient, with the addition of bark, to strengthen the general system. Dr. Bateman gave it freely with chalybeates. Pearson thinks free exposure to the air quite sufficient. De Haen ascribes great power to electricity, and mentions its effect on one patient who had a dreadful "tremblement," so that he could work no more; he could neither eat nor drink without assistance, nor render himself intelligible, and, like an infant, was obliged to be assisted for the discharge of the natural secretions. Various means have been adopted to check the salivation when profuse; opium and the narcotics, gargles of tar, superacetate of lead, which, however, blackens the teeth, have been employed as a local remedy. Dr. Wallace, in his valuable lectures, recommends the nitrate of silver, pointed, to be applied to the ulcerated edges of the gums, from which the greatest comfort is derived by the patient.

[To be continued.]

BLOOD-LETTING.

FROM DR. MARSHALL HALL'S LECTURES.

BLOOD-LETTING is so important, so powerful a remedy, so replete with consequences, both good and evil, according as it is well or ill applied, and I have made, as I believe, such improvement in its mode of exhibition, that I propose to enter at great length upon this subject. Part of what I have to say, must be said now in connection with the subject of

inflammation: but part must be reserved for another entire lecture on blood-letting.

The great difficulty is to ascertain, when we have determined upon the institution of blood-letting, *how much* or *how little* blood shall be withdrawn. Where, where can you learn this? In what book—in what lectures? Shall we take ten, or fifteen, or twenty, or twenty-five, or thirty ounces of blood—or more? It may be said that, if the patient be young and robust, and if the disease be violent, we take much blood; but if the patient be feeble, and the disease slight, we take little. But *how* much? and *how* little? are still the questions—to which I know of no answer in medical writings or lectures.

Now it is precisely to determine these questions, which are questions of life and death, that I have a proposition to lay before you, of the utmost value, in many, many points of view. The proposition applies to *every* case in which it is required *to bleed the patient fully;* that is, to the extent the system may bear and the disease require. It is full of safety, guiding us in the use of the lancet, and guarding us, at once, against excessive and inefficient blood-letting.

The plan I propose, is this:—

Place the patient perfectly upright, in the sitting posture, and desire him to look towards the ceiling of the room; having previously prepared the arm, let the blood flow to the most incipient syncope.

If the patient be strong, and the inflammation be seated in the serous membranes, or parenchymatous substance of organs, and severe, *much* blood will flow; if the patient be feeble, and the inflammation be seated in the mucous membranes, and be moderate in extent and degree, *little* blood will flow; and not only this, but precisely as much and as little as the case requires, and the patient can safely bear to lose.

This is the plan, then, which I recommend you to adopt. Determine the first question—that the case requires the *full* detraction of blood, by the history, the symptoms, by the *diagnosis;* then adopt the mode of blood-letting which I have described, and all will be safe. You will often take *more*, and often *less*, than you would have done under the former system of *guessing*, but you will always take the proper quantity; you will not allow the disease to proceed, unchecked for want of the due use of the remedy; and you will not sink your patient by carrying it to excess.

But this is not all; for by the very quantity of blood which has been drawn, you will learn much relatively to the actual powers of the patient, and the degree and nature of the disease—much of a practical kind of diagnosis.

Nay, you will be much guided, in connection with the subsequent state of the patient, and by the previous duration of the actual symptoms of the disease, as to the *repetition* of the remedy—another most important point.

If *much* blood has flowed before incipient syncope has been induced, revisit your patient *soon;* you will probably have to repeat the blood-letting in consequence of the severity of the disease, especially if you were not called in early in the first instance. If, on the contrary, *little*

blood has flowed, neither does the disease require, nor would the patient bear, further general depletion. Is not this an interesting and important piece of information? And is it to be found in medical writings or lectures? No; for even now, many years since the rule was first suggested in my work on blood-letting, it remains, either from inattention or jealousy, neglected, and unapplied in practice except by a few. But you will appreciate it duly, you will adopt it in your future career of practice, and will, in many a case of an anxious nature, think of me with satisfaction, and, I trust, with some warmer feeling. I consider the rule for the administration of blood-letting, which I have laid before you, as the most important for conducting with safety the use of a powerful remedy in the whole range of the practice of medicine; and I deem myself happy in being its discoverer and promulgator. Would we had a similar rule and guide in the use of *all* our plans of treatment, fraught, as they often are, with good or ill, according as they are applied with or without judgment and skill.

THE LATE DR. P. S. PHYSICK.

FROM A BIOGRAPHICAL SKETCH READ BEFORE THE PHILOSOPHICAL SOCIETY BY W. E. HORNER, M.D.

To the walks of surgery we must look for the genius of Physick in its most decided and extensive application. It is there that we find it exhibiting a series of triumphs, over cases of disease which had baffled the skill of men only inferior to himself, and it is there that it was so active in inventions, to improve and to palliate established modes of treatment. His management of diseased joints by perfect rest, elevation and diet, is a happy substitute for the errors generated under the use of the terms scrofula—white swelling: and ending either by amputation or in death, sometimes in both. His treatment of the inflammation of the hip-joint in children (coxalgia), by a splint, low diet and frequent purging, exhibits another of those successful innovations upon ordinary practice. His invention of an appropriate treatment and cure for that loathsome disease, artificial anus, which invention has been so unceremoniously modified and claimed by a distinguished French surgeon, the late Baron Dupuytren, is a proof of the activity and resources of his professional mind. Another invention still more frequent in its employment, from the greater number of such cases, is the application of the seton to the cure of fractures of bones refusing to unite. Other inventions are found in the treatment of mortification by blisters; of anthrax by caustic alkali; of the ligature of kid-skin for arteries, in excisions of the female breast. To him also we owe the original act, if not invention, of pumping out the stomach in cases of poisoning; also an improvement in the treatment of fractures of the condyles of the os humeri, so as to render the restoration perfect. I might in this way go on to enumerate many other points of excellence about him, but however appropriate it might be to offer a complete exposition of them, the time allotted to a ceremonial of this kind must prohibit a more extensive and complete annunciation. Those

who have had an opportunity of witnessing his practice extensively, will at least conclude with me in the saying, *Nihil tetigit, quod non ornavit.*

With this great fertility in invention and ardor in the prosecution of his profession, his original papers are deplorably few, and they are also very short. I doubt whether they exceed much half a dozen in number, and whether thirty or forty pages, printed in common type, would not contain all. Lecturing for many years on surgery, his chief organ of publicity was his class of students. The Elements of Surgery, published by his nephew, Dr. Dorsey, contain the most perfect account of his opinions and practice up to that period: The Institutes and Practice of Surgery, by Dr. Gibson, the present able and distinguished professor of surgery in the University of Pennsylvania, represents largely his views obtained through private communication and publications. Other individuals have also been, through their writings, the means of his intercourse with the press on particular points; among them may be mentioned Dr. J. Randolph, his son-in-law; Drs. Benjamin and Reynell Coates; and, to some degree, myself. Whether these several sources of information do not furnish nearly all of an original kind which he himself would have advanced, may remain unsettled as a question; but my opinion is, that nearly the whole fund is supplied. This, however, I say with great regret at his reserve as a writer. Lamentations of the same kind have been made in the case of Dessault, for it is almost entirely through his pupils that his reputation is transmitted. I may perhaps be pardoned for the allusion, in saying, that in an instance of unequalled importance, the foundation of Christianity, we have no original document, it is all through disciples.

To the preceding claims to our professional veneration, were united physical qualifications of the most perfect kind. He had a correct, sharp, discriminating eye; a hand delicate in its touch and movement, and which never trembled or faltered; an entire composure, and self-possession, the energy of which increased upon an unexpected emergency. He had a forethought of all possible contingencies and demands during a great operation, and, therefore, had everything prepared for it; when performed, he entered upon a most conscientious discharge of his duty to the patient, and watched him with a vigilance and anxiety which never remitted till his fate was ascertained. If to the foregoing brilliant qualities as an operator, and the loud plaudits which attended their exercise, we add a chastening of feeling which subdued every sentiment of vanity, and regulated entirely his judgment; and that he had an invincible repugnance, a horror at engaging in dangerous operations through ostentation, and where the probabilities of cure were not largely in favor of the patient: we have in this summary the most perfect example of a surgeon, which this country has ever seen. But as these great points and striking professional land-marks seldom come in clusters, it will probably be long in the course of Providence before there will be a reunion of all the same qualities.

His operation for the stone on Chief Justice Marshall, in 1831, was the last of his great efforts. He anticipated it with much anxiety, but

when brought to the point he rallied finely—everything was as usual in readiness. The unexpected turn given to the operation, by the almost incredible number, probably a thousand, small calculi which he met with, and their adhesion to the internal coat of the bladder, did not disconcert him in the slightest degree. He in a little time detected the existing state of things, and they were brought to a successful conclusion, being followed by a complete cure. This operation was the more interesting from the distinction of its two principal personages; the one, the acknowledged head of the legal profession, and the other of the medical: and both sustaining themselves, though in advanced life, by that tone of moral firmness and dignity which had advanced them from inconsiderable beginnings, to the stations which they then occupied.

He was remarkable for the smallness of his charges, and for an indifference to fees; for he frequently gave up large ones when there was no adequate reason for it. A gentleman who was extremely solicitous about his wife's health, and derived satisfaction from consulting Dr. Physick concerning it, on taking leave placed in his hand a roll of bank notes: the doctor put it into his pocket without looking at them. The gentleman departed; the doctor almost undesignedly drew the notes out to examine them, and found that there were two of a hundred dollars each. He sent a messenger in haste after the gentleman, and brought him back. "Do you know, sir, how much you gave me?" "Yes, sir, I gave you two hundred dollars, which I was much gratified to do, believing that my wife will now get well under your prescription." "Sir, have you two ten dollar notes in your pocket?" "Yes, sir." "Will you let me have them?" "Certainly." "Very well, here are your two hundred dollars; the two tens are quite enough:" and this resolution he persisted in until the gentleman had taken back the two hundred. In the case of Chief Justice Marshall, who was both an opulent and a liberal man, he refused positively a fee, and a sort of commutation was finally made by his consenting to receive a superb piece of plate.

With this indifference to fees, he was, however, exceedingly exact when money was received, in the appropriations of it to some productive end: his professional labors sometimes produced twenty thousand dollars a year, and his method in this respect finally yielded a sum of more than half a million of dollars.

He was exceedingly scrupulous about receiving money to which there was a doubt of the right. It is the usage of Philadelphia for physicians not to charge the clergy. Dr. Physick had attended the daughter of one; she was rich, and upon her death the executors requested an account, which he made out at two hundred dollars. It was reported to the doctor after this, that one of the executors had observed, that he thought the families of the clergy were exempt from charge. He began to consider on this matter, and finally became so scrupulous that he declined receiving a farthing: and it was only after strong importunity and explanations from the executors, that he could be prevailed upon to take the amount.

He was particularly intolerant to opposition and to disingenuousness on the part of a patient. To a lady whose maternal solicitude was excited

to rebel at the repeated bleedings of a child threatened with hydrocephalus, he said, "Madam, I take leave of your child, the responsibility of its life rests with you." She was fain to send afterwards for him on his own terms, and the child recovered. When a very young practitioner he had a gentleman of distinction, Mr. Lardner, under treatment for pleurisy. His frequent bleedings excited some expression of doubt from Mr. L.; the reply was, "Sir, I must have my own way, or none at all; I bid you good day." The gentleman afterwards mentioned his astonishment at such conduct, not thinking that in this decision of character were the germs of the greatest surgeon in America, and one of the first in the world. To a West Indian who was refractory at being tapped for a hydrocele, he said, "Sir, I'll have none of this, down with your pantaloons, I know perfectly what I am about." He operated and cured him.

He expressed the strongest reprobation of the conduct of a gentleman, who, being under treatment for sore legs, had by feasting and drinking violated the prescribed rules of diet. He felt it as a breach of good faith between the parties. On the contrary, where in a difficult case the patient had concurred fully with him, had scrupulously abided by, and assisted cheerfully in all that was done, when the cure was finished, the esteem which this candor produced made him feel almost as much obliged to the patient as the patient could be to him, and he often spoke of it afterwards with pleasure. My brother-in-law, Mr. Dulles, had a dangerous inflammation of the knee, in which he perseveringly and scrupulously followed every direction and injunction of Dr. Physick, and it was attended with the happiest result: Dr. Physick never forgot it. This was a disease which in his early professional life was considered among the most formidable, under the name of white swelling, and the plan of treatment which he instituted, as I before mentioned, was really an immense step in the practice of medicine.

BOSTON MEDICAL AND SURGICAL JOURNAL.

BOSTON, JULY 11, 1838.

A BONELESS ARM.

A CASE like the following, if not extremely rare, is certainly without a parallel in this city.

Mr. Brown, a worthy and industrious provision dealer in Derne street, now thirty-six years of age, in his eighteenth year had the misfortune to have the right humerus fractured nearly in the middle. He was holding, under disadvantages, an enraged cow by the horns; in some unexpected movement of the unruly animal, both fell, and the bone of his right arm was broken in the fall. Under the care of a judicious surgeon, a reunion was favorably going on; but before the curative process had been completed, Mr. Brown accidentally had another fall, and broke open the old fracture again. Notwithstanding a most vigilant and untiring devotion

to the injured limb, the divided extremities would not adhere; and, to the surprise of the medical attendant, the shaft of each part of the divided bone began to diminish in size, and shorten in length. By a gradual action of the absorbents, the whole of the arm bone, between the shoulder and elbow, was at length completely removed, and that too without any open ulcer, so that not a single vestige of it was left. It has now been in this state for many years, and probably will remain so for life, as there never will be a deposition of bony matter again in that place, nor even a cartilaginous or a condensed ligamentous substitute, which will materially change it from the present singular condition.

Mr. Brown presents the spectacle of one short arm and one long one. The right fore arm and hand are of a size to correspond with the sound one on the left side, and, under certain circumstances, are equally as strong. Ordinarily the right arm swings hither and thither, like a thong with a weight at the extremity; for the fore arm and hand, with reference to the division above the elbow, constitute a pendulum, oscillating according to the movements of the body. Although it is impossible to push with the defective arm, he can draw a burden towards himself with it as strongly and tenaciously as with the other; and in so doing, the muscles are elongated, so that the arm is extended to its original length. When the resistance is removed, the muscles instantly shorten themselves about six inches. To show the perfect non-resistance of the apparatus of muscles, arteries, veins and nerves in the soft, boneless space, we saw him twist the palm of the hand, the other evening, twice round, which consequently presented the strange anomaly of having all the apparatus of the arm twisted like the strands of a rope. In that state the pulsations of the brachial artery and all its branches and ramifications could be felt under the finger, though passing in gyrations, like a winding stair-case, twice round the soft, unresisting fleshy mass.

Under any aspect in which this curiosity may be viewed, either by the anatomist or the philosopher, the resources of nature, and the admirable manner in which she conducts the concealed functions of a living body, are in the highest degree interesting.

Power of Resistance in the Living Skull.—A boy, five years old, a son of Mr. Marston, a farmer on Long Island, in the harbor of Boston, fell accidentally, in following his father by the side of an ox-team, with his head exactly in the rut of the cart path, forward of the wheel. Before Mr. Marston could possibly snatch the child from the dreadfully impending danger, a heavy hay-cart wheel, having a thick, broad iron tire, rolled directly over his child's head—rising up over the space between the crown and the ear, and down to the ground again from the temple. The agonized father ran with the supposed mutilated, if not dead, body to the house. On examination, by the mother, the scalp was found to be cut by the edge of the tire, as though a knife had been drawn over it, yet little or no blood flowed—showing the white bone below. As no injury of the skull could be detected, she closed the external wound with a simple dressing, which kept the edges in juxta-position. The boy exhibited considerable confusion, but it could hardly be called a delirium, and occasionally vomited blood for about a week. He also bled at the mouth and nose. It is plain, therefore, that the blood thrown from the stomach was swallowed from time to time. At the end of six days the little fellow was quite restored, and we rarely see a finer specimen of ro-

bust, juvenile health and happiness, than in the person of this hard-headed boy. A wheel, of half the weight, rolled over a dry skull, would have ground it to powder. To the admirable carpentry of the bones of the head, presenting inimitable strength in every direction, together with the resistance of the living principle, vitality, which is only known by its name, are we to look for the preservation of this child.

Physico-Medical Society of New Orleans.—An extraordinary movement has been made in this body, it will be perceived, by reading the accompanying resolution. In a paper of that city, called the True American, an article appeared on the 17th of April, entitled, "*Sight given to the born blind*," which has been copied extensively all over the Union. It seems that Dr. Luzenberg operated on a Seminole woman for cataract, who *was not totally blind*, as has been represented; but now, according to a report signed by eight eminent physicians and surgeons of that city, "the vision in her left eye is irrecoverably lost, and that of her right eye manifestly impaired." Instead, therefore, of restoring a blind person to sight, he has actually made the unfortunate subject of his surgical manœuvrings *no better*. But it seems Dr. L. was fully aware of all this, although sanctioning the publication which declared him to have achieved a great triumph in ophthalmic surgery. Of the nature of the charges which finally led to his expulsion, we have not yet been advised. It seems, however, to have been a case analogous to one brought before the Mass. Medical Society, two years ago, which eventuated in the expulsion of a fellow.

The following resolutions were adopted unanimously, on the 9th June, 1838, at an unusually numerous meeting of the Physico-Medical Society of New Orleans.

"Whereas, after a patient and dispassionate investigation of the charges preferred against Dr. Charles A. Luzenberg, and of the testimony adduced by him in his defence, it is the solemn and deliberate opinion of the members of the Physico-Medical Society, that he stands fully convicted of conduct and practices at once immoral, ungentlemanly, and empirical—Therefore be it resolved, that said Dr. Charles A. Luzenberg, a graduate of Jefferson Medical College of Philadelphia, be expelled from this Society, and that his expulsion be published in all the medical journals of the Union, and communicated to all the medical societies of the same." By order of the Society, H. Davidson, *President.*

A true copy—J. M. W. Picton, M.D., *Recording Secretary.*

Attest—C. F. Snowden, *Corresponding Secretary.*

Lunatic Hospital in New Hampshire.—At this late period, the Legislature of New Hampshire have decided upon the expediency of erecting an institution for the reception of a hitherto neglected class of sufferers in that State. Dr. Bell labored perseveringly many years to bring about this desirable object, but without much encouragement. To his exertions, however, in making a beginning, are to be imputed the present success of the friends of humanity. Whenever any facts regarding the appropriations, the locality, and, lastly, the medical officers who are to manage it, are obtained, they will have a place here.

Medical Examinations.—A considerable number of gentlemen will submit themselves to an examination for the degree of doctor in medicine, in the course of a few weeks, in Boston. Those who are successful, will be graduated the ensuing commencement, at Cambridge.

Boston Medical Association.—Last week a re-print of the by-laws, fee-bill, &c., of the Medical Association of the city, was distributed amongst the members. There have been many changes in the registered catalogue of practitioners in the city since the first organization of the Society. Fifty-seven members have died since 1806. Dr. James Jackson is now the senior of the profession, in the order of admission.

Medical Society of the City and County of New York.—From the character of a long article in one of the New York papers, it seems that considerable internal management is going on to place certain gentlemen of the profession in the position of President and Vice President of that Society; and it is clear, too, from the representations of the writer, that about one half of one sort of members are stupid enough to be made levers of for elevating to every office of distinction, men who have made it their business, through life, to seek the highest places in the synagogue.

Dr. Bell's Select Medical Library and Eclectic Journal.—The last number of this admirable work contains the conclusion of Dr. Edwards's classic work "On the Influence of Physical Agents on Life," a work which ought to be in the library of every medical practitioner; "A Necrological notice of Dr. Physick," by Dr. Horner; "An Experimental Investigation into the Functions of the eighth pair of Nerves," by Professor Reid; and "Microscopical Observations on the Nervous System in Man and Animals," by Professor Ehrenberg (with numerous engravings), besides valuable journal matter.

Prize Questions for 1838, *by the Medical Society of the State of New York.*—The Diseases of Spinal Column—their diagnosis, history and mode of treatment.

The sum of one hundred dollars is offered for the best dissertation on the above subject, to be forwarded to the Secretary of the Medical Society of the State of New York, on or before the first of January, 1839.

Yellow Fever.—A few cases seem to have been developed at New Orleans, exciting a considerable degree of consternation. The late havoc of human life in that ill-fated city, will not be forgotten.

Lectures on Phrenology.—Mr. Burke, an English gentleman, is lecturing at the Athenæum on phrenology. He discourses sensibly, and like a person familiar with the subject. It is an unfortunate season, however, as people will be unwilling to be confined to a room with the thermometer at ninety.

DIED,—In Warwick, R. I., Dr. Christopher N. Greene, aged 29.—In Hingham, Dr. Daniel Shute, 45.—In Westford, Dr. Asaph Byam, 47.—Lost, in the Pulaski, Dr. Ash, of Philadelphia.

Whole number of deaths in Boston for the week ending July 7, 27. Males, 15—females, 12.

Consumption, 4—scarlet fever, 1—typhous fever, 1—pneumo-thorax, 1—sudden, 1—teething, 1—hooping cough, 1—smallpox, 1—convulsions, 1—worms, 1—old age, 2—erysipelas, 1—disease of the brain, 1—diarrhœa, 1—drowned, 3—child-bed, 1—infantile, 1—inflammation of the bowels, 1—fits, 1—stillborn, 1.

BERKSHIRE MEDICAL INSTITUTION.

THE annual Course of Lectures for 1838, in this Institution, will commence on the 23d of August (the last Thursday but one in the month) and continue thirteen weeks.

The pre-requisites for admission to an examination for the Degree of Doctor of Medicine are, three full years' study under a regular practitioner of medicine; attendance on two full courses of medical lectures, one of which must have been at this school; a defensible thesis on some subject connected with medical Science; an adequate knowledge of the Latin language, and a good moral character. Gentlemen who intend to present themselves as candidates for a Degree are particularly requested to procure full and formal certificates of time.

By legalizing the study of Anatomy, the Legislature of Massachusetts has furnished its Schools with superior advantages for Practical Anatomy. It has also, by this provision, most effectually guarded the sepulchres of the dead from all violation.

Theory and Practice of Medicine, by	HENRY H. CHILDS, M.D.
Botany, Chemistry and Natural Philosophy, by	CHESTER DEWEY, M.D.
Principles and Practice of Surgery, by	WILLARD PARKER, M.D.
Materia Medica and Pathological Anatomy, by	ELISHA BARTLETT, M.D.
Obstetrics, by	DAVID PALMER, M.D.
Anatomy and Physiology, by	ROBERT WATTS, JR., M.D.
Legal Medicine, by	HENRY HUBBARD, Esq.

Fee for the Course of Lectures, $50. Fee for those who have already attended two full courses at an incorporated medical school, $10. Graduation fee, $18. Fellows of the Massachusetts Medical Society, and others who have received the Degree of Doctor of Medicine, are admitted gratuitously to the lectures.

R. WATTS, JR., *Dean of the Faculty.*

Pittsfield, Mass., 20th June, 1838. †Aug23

FALLING OF THE WOMB CURED BY EXTERNAL APPLICATION.

DR. A. G. HULL'S UTERO-ABDOMINAL SUPPORTER is offered to those afflicted with *Prolapsus Uteri, or Falling of the Womb*, and other diseases depending upon a relaxation of the abdominal muscles, as an instrument in every way calculated for relief and permanent restoration to health. When this instrument is carefully and properly fitted to the form of the patient, it invariably affords the most immediate immunity from the distressing "*dragging and bearing-down*" sensations which accompany nearly all cases of visceral displacements of the abdomen, and its skilful application is always followed by an early confession of radical relief from the patient herself. The Supporter is of simple construction, and can be applied by the patient without further aid. Within the last three years nearly 1500 of the *Utero-Abdominal Supporters* have been applied with the most happy results.

The very great success which this instrument has met, warrants the assertion, that its examination by the physician will induce him to discard the disgusting Pessary hitherto in use. It is gratifying to state that it has met the decided approbation of Sir Astley Cooper, of London, Edward Delafield M.D., Professor of Midwifery, University of the State of New York, of Professors of Midwifery in the different Medical Schools of the United States, and every other Physician or Surgeon who has had a practical knowledge of its qualities, as well as every patient who has worn it.

The public and medical profession are cautioned against impositions in this instrument, as well as in Trusses vended as mine, which are unsafe and vicious imitations. The genuine Trusses bear my signature in writing on the label, and the Supporter has its title embossed upon its envelope.

AMOS G. HULL, Office 4 Vesey Street, Astor House, New York.

The Subscribers having been appointed Agents for the sale of the above instruments, all orders addressed to them will be promptly attended to.

LOWE & REED,
Jan. 3. 1yreop 24 Merchants Row, Boston.

SARLANDIERE'S ANATOMY.

SYSTEMATIC AND ANATOMY, OF HUMAN ORGANOGRAPHY, in synoptical tables, with numerous plates, for the use of University Faculties, and Schools of Medicine and Surgery, Academies of Painting, Sculpture, and the Royal Colleges. By the CHEV. J. SARLAN[illegible]RE, D.M. Translated from the French by W. C. Roberts, M.D.

A few copies of the above for sale at Ticknor's, corner of Washington and School streets, at one half the original subscription price.

VACCINE VIRUS.

PHYSICIANS in any section of the United States can procure ten quills charged with PURE VACCINE VIRUS by return mail, on addressing the editor of the Boston Medical and Surgical Journal, enclosing one dollar, *post paid*, without which, no letter will be taken from the post office. Oct. 25.

THE BOSTON MEDICAL AND SURGICAL JOURNAL is published every Wednesday, by D. CLAPP, JR. at 184 Washington Street, corner of Franklin Street, to whom all communications must be addressed, *post-paid*. It is also published in Monthly Parts, each Part containing the weekly numbers of the preceding month, stitched in a cover. J. V. C. SMITH, M.D. Editor.—Price $3.00 a year in advance, $3.50 after three months, and $4.00 if not paid within the year.—Agents allowed every seventh copy *gratis*.—Orders from a distance must be accompanied by payment in advance or satisfactory reference.—Postage the same as for a Newspaper.